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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

NORIO OHKUMA

Filed: June 23, 2003

For: METHOD FOR MAKING
THROUGH-HOLE AND INK-JET
PRINTER HEAD FABRICATED
USING THE METHOD

Group Art Unit: 1763

September 28, 2005

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated June 28, 2005, please amend the above-identified application as follows.

JPW



In re Application of:

Norio OHYKUMA

Appln. No.: 10/600,763

Filed: June 23, 2003

For: METHOD FOR MAKING THROUGH
HOLE AND INK-JET PRINTER HEAD
FABRICATED USING THE METHOD

Docket No. 03560.003317

Examiner: Roberts Culbert

Group Art Unit: 1763

September 28, 2005

MAIL STOP AMENDMENT

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below:

CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	14	MINUS	20	0	x \$25 \$50	\$ 0.00
INDEP. CLAIMS	1	MINUS	3	0	x \$100 \$200	\$ 0.00
Fee for Multiple Dependent claims \$180/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$ 0.00

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ A check in the amount of \$_____ is enclosed.

☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate of this sheet is enclosed.

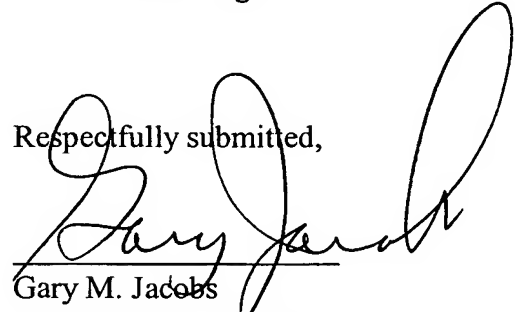
☒ Any prior general authorization to charge an issue fee under 37 C.F.R. § 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. §§ 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate of this paper is enclosed.

☐ A check in the amount of \$_____ to cover the Extension fee for response within _____ months is enclosed.

☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicant's undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Gary M. Jacobs
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